

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: NORTHSIDE ELDER ESTATE (611036)

Address: 808 NORTH 3RD AVENUE, STRATFORD, WI 54484

License Status: REGULAR

Licensed/Certified/Registered 08/01/1998

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Survey ID: 0095287 **End Date:** 07/07/2005 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094907 **End Date:** 05/10/2005 **Type:** OTHER **Purpose:** COMPLAINT/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094227 **End Date:** 02/23/2005 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091029 **End Date:** 09/03/2003 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Complaint History

Date Complaint Received: 06/17/2005

Date Investigation Completed: 07/07/2005

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE
PHYSICAL PLANTS & SAFETY HAZARDS
STAFF ADEQUACY

Result

SUBSTANTIATED
SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

NOT RECORDED
NOT RECORDED

Date Complaint Received: 03/07/2005

Date Investigation Completed: 05/10/2005

Subject Area(s)

PROGRAM SERVICES

Result

NOT SUBSTANTIATED

SOD #

Date Complaint Received: 10/01/2004

Date Investigation Completed: 02/23/2005

Subject Area(s)

RESIDENT RIGHTS

Result

NOT SUBSTANTIATED

SOD #

Date Complaint Received: 08/25/2003

Date Investigation Completed: 09/03/2003

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE

Result

NOT SUBSTANTIATED

SOD #

Date Complaint Received: 06/09/2003

Date Investigation Completed: 09/03/2003

Subject Area(s)

RESIDENT BEHAVIOR/FACILITY PRACTICE

Result

NOT SUBSTANTIATED

SOD #

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